



COMPLAINT LODGEMENT FORM

PLEASE NOTE: This form should ONLY be used to lodge a complaint and NOT a request for service.

SECTION A *Customer Details*

Title: Mr Mrs Ms Miss Other

Surname: _____ First Name: _____

SECTION B *Contact Details*

Address: _____

Suburb: _____ Post Code: _____

Phone (H): _____ (W): _____

(M): _____ Fax: _____

Email: _____

Preferred Contact Method: Telephone Letter Email

SECTION C *Complaint Details*

IMPORTANT NOTICE

Yarrabah Aboriginal Shire Council is collecting your personal information for the purpose of assessing your complaint and to ensure that Council is able to remain in contact with you regarding the status of your complaint. Your personal information will only be assessed by Employees and or Councillors of Yarrabah Aboriginal Shire Council. Some of this information may be given to an external investigator for the purposes of investigation, the person complained about where the rules of natural justice requires, the Queensland Ombudsman in the event that a review of Council's decision is requested, Council's Legal Representatives or Insurance Broker and / or underwriter where legal or insurance advice is required, the Crime and Corruption Commission and Queensland Police Service in the event that the matter involves criminal conduct or official misconduct and other authorised Government Agencies as required to process your complaint. Subject to the above disclosures, your personal information will not be given to any other agency, unless you have given us permission or we are authorised or required by law to do so.

Have you previously lodged a complaint with Council regarding this matter? Yes No

If YES, what date was the complaint made: _____/_____/_____

Have you been notified of progress, or the outcome Yes No

If NO, have you previously lodged details of your complaint with any other agency/authority? Yes

No

If YES, to whom: _____

Details of the Complaint

When did it happen? _____

Where did it happen? _____

Who was involved? _____

Please provide details of your complaint below. Any relevant supporting information which may be of assistance when assessing your complaint attach.

What do you think Council should do to resolve your complaint? (Please keep your response factual, achievable and realistic).



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SECTION D *Acknowledgement*

All the information provided is true and correct and to the best of my knowledge.

Signature: _____ Name: _____

Date: ____/____/____

SECTION E *Office Use Only*

Action Officer: _____

Position: _____

Complaint Lodged: Telephone Letter Email

Note: _____

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